

CLAIMS ONLY						Application Number <i>10654226</i>		Filing Date				
						Applicant(s)						
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	7					51						
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44	1					94						
45	1					95						
46	1					96						
47	1					97						
48	1					98						
49	1					99						
50	1					100						
Total Indep	2					Total Indep						
Total Depend	16	←	←	←		Total Depend	←	←	←			
Total Claims	18					Total Claims						